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ABSTRACT

Minority children in rural settings have limited access to educational and economic resources. School psychologists, with commitments to several rural schools, may have difficulty getting to know minority children and to understand their diverse needs. School psychologists specifically trained to work in rural settings consider their major problems to be little understanding of the school psychologist's role by parents, teachers, and administrators, and a lack of understanding about exceptional children by parents and school personnel. There is a need to deal with biases and values and to develop a plan to minimize the effects of value differences on services to children. Reevaluation of minority children once diagnosed as mentally retarded is often necessary. Resistance from children can be lessened by learning about their background, interests, and concerns; by listening to them; and even by visiting their homes. Although school nurses, teachers, speech clinicians, and other personnel can often help the school psychologist to improve conditions for minority children, decreasing resistance from teachers and administrators is often a slow process. Effective service to minority children in rural settings demands that the school psychologist take time to learn from the children and the setting. (NRB)

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A PERSONAL PERSPECTIVE

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SERVING MINORITY CHILDREN IN RURAL SETTINGS:
A PERSONAL PERSPECTIVE¹

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Minority children and youth in rural settings share with their nonminority classmates limited school psychological services in many regions of the United States. The psychologist soon discovers that educational and economic resources are not readily available in rural settings and that many children from minority or low socioeconomic groups have limited access to these resources.

The psychologist in rural settings usually is assigned to several schools over a broad area, and thus spends a large amount of time traveling to each location. With limited time at each school, the psychologist has problems getting to know the children, school, and community. Getting to know minority children can be especially difficult, as these students represent a group with diverse needs. The psychologist becomes creative, diplomatic, flexible, and assertive in meeting these needs. Student advocacy becomes more than a catchword. Before working with minority children, the psychologist must carefully examine his/her biases and values. These may not be shared by the children, parents, and educators in rural settings.

In 1978, a committee of Division 16 members of APA rank ordered a list of 13 problems encountered by rural school psychologists and Trenary (1981 NASP Convention) compared those rank orders to rank ordering of the same list by school psychologists ($N = 11$) who had graduated from a special BEH funded training program for school psychologists and were employed as a psychometrist or psychologist. (Trenary's comparison is attached.)

Paper presented at the American Psychological Association Convention, August 1981.

There were some significant differences in the rank orderings of the two groups, but what is especially important from a personal perspective is that the school psychologists who were specifically trained to work in rural settings saw as their major problems little understanding of the school psychologist's role by parents, teachers, and administrators, and lack of understanding of exceptional children by parents and other school personnel. These were the major problems encountered by this writer when she worked as a school psychologist in rural southern Illinois. Approximately 75% of all referrals were minority children, 15% low SES white children, and 10% middle SES white children. These problems, however, were tied in with biases and value differences. However, it was not the parents of rural minority children who seemed to have little understanding, it was the administrators and some teachers.

I followed in the footsteps of circuit riders and unhappy school psychologists who seemed to have limited knowledge, skills, and/or time to work with the rural minority children referred to them. Thus, many misplacements had been made and many teachers and administrators convinced that the minority children were mentally retarded and/or ruining their schools.

True and fairly typical statements encountered by this psychologist upon visits to the schools illustrate the need to deal with biases and values and develop a plan to minimize the effects value difference have on services to children. The following statements were made by school administrators and teachers: "Our test scores have gone down significantly since the colored kids came to the school; our school is being ruined"; "The colored kids drink all the pop out of the machine, there is none for anyone else"; "Why isn't he retarded? The whole family is"; "Oh, no, I haven't been working with him in reading, he's retarded you know"; "She stinks."

Several minority children had been evaluated via a Stanford-Binet and a Bender Gestalt while in first grade, and placed in classrooms for educable mentally retarded (EMR) children on the basis of this cursory evaluation. Others had been evaluated via a partial WISC by the circuit rider and placed in EMR classrooms. Upon reevaluation, I found that the children had average or above average performance skills, and it was apparent that they were not mentally retarded. However, it was difficult to explain to administrators and teachers why they had been diagnosed as mentally retarded three years earlier, thus my actions were suspect and met with much resistance. Concerns were expressed by the teachers because "the psychologist is taking all the mentally retarded children out of special classes."

In spite of this resistance, survival was possible because of other teachers who strived to provide the best education for all their children and other support personnel. One teacher who was working with some of the minority children during recess was told by her principal to stop spending her extra time with the "colored" kids and use it with kids who could learn. The principal told her to refer the children for placement in mentally retarded classes, and when she refused to do so, he referred them for evaluation. Many teachers and administrators thought that special class placement would be automatic if a referral was made as they viewed the psychologist's role as the "tester" and "placer."

One cannot hope to change values and biases, but one can hope to minimize their effects on children's lives. The school psychologist working in a rural setting cannot effect changes without help. Help is waiting in the rural schools, sometimes via resources that have been untouched, and sometimes via traditional resources. Resistance from children was lessened by learning about their background, their interests, their concerns, and listening to them rather

than simply administering a battery of tests. A willingness to visit in their homes was appreciated by the children and parents alike. Resistance from parents was lessened by including a minority teacher who was respected by the parents in both the school and home conferences or by including the school or county health nurse, whose role was more readily understood by the parents.

The nurse and I became a team that worked well together, each providing unique skills but also sharing skills. The speech clinician, often the only other support person serving the rural schools, was also a valuable team member. She had knowledge of local language differences and could provide valuable input into whether there were speech problems present or simply dialect or semantic differences.

Decreasing the resistance of teachers and administrators who viewed the minority children as liabilities in their schools was a slow process, but it can be done by directly demonstrating that the provision of the best possible services to the children will result in fewer problems over time. For example, one school district had no provision for early screening of learning problems. The psychologist, armed with facts regarding the problems of first identifying learning problems in high school, was able to get the superintendent's "o.k." to provide kindergarten screening. The screening resulted in not only identifying children who were already encountering problems, it also identified problem classrooms. The administrators had placed a large percentage of the minority kindergarten children in one of the smallest classrooms with one of the least effective teachers. The psychologist was able to make suggestions for reorganization of the classroom and peer tutoring which could improve the effectiveness of the teacher and the children's learning.

In meeting the needs of minority group children in rural settings, the school psychologist may find himself/herself performing duties that are not

considered traditional in the profession. The psychologist will want to find the answers to several questions before beginning work--Are minority group students new to the setting? Were these children in segregated schools before? Are minority students treated as equals to nonminority students? Observation and direct assistance in the classroom may prove more beneficial than formal assessment to the teacher. Home visits will result in more useful sharing of information than often results in formal staff meetings. Attempt to modify racist attitudes will go awry if the psychologist is not an accepted member of the school team, and membership may not come easily.

Effective service to minority children in rural settings demands that the school psychologist take time to learn from the children and the setting.

COMPARISON OF RANK ORDERINGS OF THE PROBLEMS OF RURAL SCHOOL PSYCHOLOGISTS

	August 1978 Div. 16 Committee			August 1980 BEH program grads		
	N	Mean rank	Final order	N	Mean rank	Final order
Heavy caseload	16	4.24	1	10	4.20	3
Little understanding of school psychologist's role by parents, teach- ers, administrators	17	4.75	2	10	2.80	1 **
Isolation from other psychologists	18	4.78	3	10	6.00	5 **
Much travelling	15	6.20	4	10	6.60	6
Limited availability of quality school per- sonnel to serve in rural areas	17	6.29	5	8	5.75	4
Lack of understanding of exceptional children by parents, other school personnel	18	6.44	6	10	3.10	2 **
Non-acceptance by other school personnel	15	6.60	7	9	8.11	10 *
Inadequate space	17	6.94	8	10	7.60	9
Distance to universities for information, support	16	8.06	9	10	7.30	8
Lack of knowledge of local channels of communication	16	8.19	10	7	7.29	7
Value system differences	16	8.38	11	8	9.13	12
Test instruments some- times inappropriate for rural kids	15	9.00	12	10	8.40	11
Local language usage differences	15	9.80	13	9	11.11	13 *

* $p < .05$

** $p < .01$

Trenary, 8/28/80

Source: Diana S. Trenary, University of Kentucky, 8/28/80